



MISSOURI DEPARTMENT OF NATURAL RESOURCES
WATER PROTECTION PROGRAM, WATER POLLUTION BRANCH
PO BOX 176, JEFFERSON CITY, MO 65102

FORM K - APPLICATION FOR INDIVIDUAL SMALL MS4 GENERAL PERMIT (FORM M MUST ALSO BE SUBMITTED)

FOR AGENCY USE ONLY

CHECK NUMBER

DATE RECEIVED

FEE SUBMITTED

THIS IS FOR A STORMWATER ONLY DISCHARGE PERMIT.

1.00

- ☐ a. This municipality/area is now operating a separate storm sewer system under Missouri Operating Permit Number (NPDES) MO- _____ or
☐ b. This is a new permit;

2.00 NAME OF MUNICIPALITY/AREA MS4

2.10 ADDRESS (HEADQUARTERS PHYSICAL LOCATION)

STREET

CITY

STATE

ZIP CODE

3.00 OWNER

NAME

TELEPHONE NUMBER

ADDRESS

STREET

CITY

STATE

ZIP CODE

4.00 CONTINUING AUTHORITY

NAME

TELEPHONE NUMBER

ADDRESS

STREET

CITY

STATE

ZIP CODE

5.00 MUNICIPALITY/AREA CONTACT

NAME

PHONE

FAX

TITLE

6.00 FOR EACH KNOWN STORMWATER OUTLET GIVE LEGAL DESCRIPTION (ATTACH ADDITIONAL SHEETS AS NECESSARY)

Stormwater Outlet Number _____ 1/4 _____ 1/4 _____ Sec _____ T _____ R _____ County _____
Lat _____, Long _____

6.10 FOR EACH KNOWN STORMWATER OUTLET LIST THE NAME OF THE RECEIVING WATER

Outlet Number _____	Receiving Water _____
Outlet Number _____	Receiving Water _____
Outlet Number _____	Receiving Water _____

7.00 ATTACH A USGS 1" - 2000' SCALE MAP SHOWING THE LOCATION OF THE MUNICIPALITY/AREA IN RELATION TO THE LOCAL ROAD SYSTEM. INDICATE ON THE MAP THE MUNICIPALITY/AREA BOUNDARIES, THE RECEIVING STREAM(S); ALL KNOWN STORMWATER OUTLETS; AND THE MAP SECTION, TOWNSHIP, AND RANGE.

8.00 I CERTIFY THAT I AM FAMILIAR WITH THE INFORMATION CONTAINED IN THE APPLICATION, THAT TO THE BEST OF MY KNOWLEDGE AND BELIEF SUCH INFORMATION IS TRUE, COMPLETE AND ACCURATE, AND IF GRANTED THIS PERMIT, I AGREE TO ABIDE BY MISSOURI CLEAN WATER LAW AND ALL RULES, REGULATIONS, ORDERS AND DECISIONS, SUBJECT TO ANY LEGITIMATE APPEAL AVAILABLE TO AN APPLICANT UNDER THE MISSOURI CLEAN WATER LAW OF THE MISSOURI CLEAN WATER COMMISSION.

NAME AND OFFICIAL TITLE (TYPE OR PRINT)

PHONE

SIGNATURE

DATE SIGNED

INSTRUCTIONS FOR FILLING OUT FORM K - APPLICATION FOR SMALL MS4 GENERAL PERMIT

General permit fees (\$150) shall be submitted with Form K - Application for general permit for small MS4. Persons with more than one (1) non-continuous area shall obtain a general permit for each specific area. Where there are multiple releases from a single operating area, one (1) application may cover all facilities and releases.

Form M must also be submitted.

- 1.00 Fill out either Item (a.) or Item (b.) as applicable.
- 2.00 Name of municipality/area MS4 to be permitted - by what name is this area known locally? Examples: Columbia MS4, Fenton MS4, Joplin MS4, State Highway 5 MS4, Federal Medical Prison MS4, etc.
- 2.10 Give the street address of each municipality/area's headquarters. If the municipality/area's headquarters lacks a street name our route number, give the most accurate alternate geographic information.
- 3.00 Owner - legal name and address of owner.
- 4.00 Continuing authority - permanent organization which will serve as the continuing authority for the operation, maintenance, and modernization of the separate storm sewer system.
- 5.00 Contact person for this permit/application.
- 6.00 A stormwater outlet is the point(s) at which stormwater is discharged to a receiving stream. This may be the point(s) where water leaves the municipality/area. Outlets location(s) should be given in terms of the legal description. Sufficient information should be submitted so the stormwater outlet(s) may be located by department staff.
- 6.10 Receiving water(s) - the name of the stream(s) to which the stormwater is directed and any down gradient point at which a continuous flowing stream or permanent waterbody is reached.
- 7.00 A map showing the municipality/area in relation to the local roads and receiving water(s). Attach a 1" = 2000' scale USGS topographic map that can be obtained from the department's Geological Survey & Resource Assessment Division in Rolla, MO. (573) 368-2125.
- 8.00 Signature - all applications must be signed as follows and the signature must be original. For a municipal, state, federal, or other public entity, the signature must be by either a principal executive officer or by an individual having overall responsibility for environmental matters at the municipality/area.

If there are any questions concerning this form, please contact the Water Protection Program, Water Pollution Branch at PO Box 176, Jefferson City, MO 65102 or by telephone at (573) 751-6825.